

Section of Orthopædics

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Infected Traumatic Epidermoid Cysts, the Result of Rubbing by an Artificial Limb.—LEON GILLIS, M.B.E., M.Ch.(Orth.), F.R.C.S., F.R.C.S.Ed.

E. G., male, aged 50.

This patient has worn an artificial limb on a right above-knee amputation since 1933 and developed an infected focus in the stump twelve months later. Further abscesses appeared, and for the last fifteen years the stump has been discharging constantly, although he has worn the prosthesis at all times.

When seen in June 1953 there was a large area of puckered, scarred skin on the inner side of the stump, with three discharging sinuses, probably communicating by fibrous subcutaneous tracks. Examination of the pus revealed *Staphylococcus aureus* only, and he has been treated up to now by antibiotics, local antiseptics and infra-red rays (Fig. 1). The acute inflammation has subsided, but the problem of limb fitting remains as the stump is at present unsuitable to wear a prosthesis.

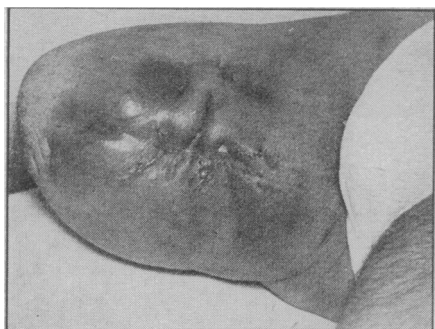


FIG. 1.—Chronic infected traumatic epidermoid cysts over the medial side of the thigh, the result of an unsuitable socket.

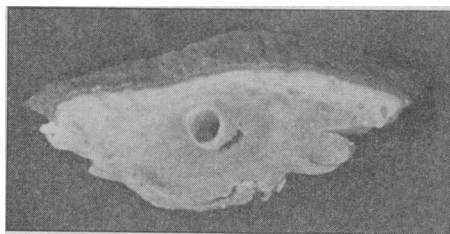


FIG. 2.—Excision of an ellipse of skin down to deep fascia. Macroscopic section shows thickened skin with cystic area.

The histological picture can be described under the following headings:

- (1) The epidermis becomes invaginated at an early stage.
- (2) Large pockets of keratin appear in the sub-epidermal regions.
- (3) Cysts are separated close to the surface.
- (4) Cysts appear in the deeper tissues (Fig. 2).
- (5) The cysts become infected, producing sinuses and there is an inflammatory reaction and giant cells appear around.

The cause of this condition is a poorly fitting artificial limb where the shape and the alignment of the socket are unsuitable for the anatomical configuration of the thigh stump.